

State of Connecticut Department of Aging and Disability Services Long-Term Care Ombudsman Program

Human Services Committee Public Hearing Thursday, March 10, 2022 Testimony of Mairead Painter, State Long-Term Care Ombudsman

Good afternoon, Senator Moore, Representative Abercrombie, ranking members Senator Berthel, Representative Case and distinguished members of the Human Services Committee. My name is Mairead Painter, and I am the State Long-Term Care Ombudsman. Thank you for the opportunity to offer testimony today. The Long-Term Care Ombudsman Program (LTCOP) is mandated by the Older Americans Act and Connecticut General Statutes Sections 17b-400 through 17b-406 to provide services to protect the health, safety, welfare, and rights of the residents of long-term care facilities. As the State Ombudsman, it is my responsibility to facilitate public comment and represent the interests of residents to recommend changes to the laws, regulations, policies, and actions which affect the resident's quality of life and care. On behalf of the residents in Connecticut's skilled nursing facilities, residential care homes and managed residential communities, I would like to testify regarding several bills that are before you today.

H.B. No. 5335 AN ACT REQUIRING LONG-TERM CARE FACILITIES TO CONDUCT SEX OFFENDER BACKGROUND CHECKS ON STAFF AND RESIDENTS.

I appreciate the desire to protect residents in nursing homes, however I am not currently able to support this well intended bill. The mission of the Long-Term Care Ombudsman Program is to protect the health, safety, welfare, and rights of long-term care residents. I understand where the concern comes from and why people want to see parameters put in place to better safeguard residents living in skilled nursing homes.

I worked in nursing homes 20 years ago and had a process for screening all applications. As part of that process, we would use the sexual offender criminal history databases that was even available then as well as other judicial publicly available websites. Every nursing home currently has the right to look an individual up on these public lists and portals. Every nursing home has the right review all information related to an admission referral and decide if the facility can appropriately care for the individual. When they agree to accept the individual, they are agreeing that they can appropriately provide care and services that meet that individual needs and goals.

As we have seen the census our skilled nursing facilities drop, we have seen corporations making decisions based on the ability to fill the bed and not the overall ability to care for each resident appropriately or to safeguard everyone living in the facility.

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I absolutely do not believe that this is a question related to knowing and having access to information about a resident's history. The facilities where we have had the greatest concerns knew the history of the resident. They made a business decision to accept them without providing the necessary staff, care, and services to protect both these individuals and to safeguard everyone within the skilled nursing facility.

I want to be clear that this is not the majority of the skilled nursing facilities in our state. This is a business decision that individual companies or facilities have made. Most of the Skilled nursing facilities screen proposed applications and make appropriate decisions as to their ability to care for the individuals who are applying. When making that decision they must think about all the care needs the individual may have including the ability to return to the least restrictive environment and provide appropriate discharge planning. Many skilled nursing facilities do this very well. However, we continue to see a portion of the facilities in our state that put profit over care.

I agree we need to have more accountability related to the acceptance of an admission to a skilled nursing facility. Once a resident is accepted there are currently requirements in place to ensure that the skilled nursing facility can provide appropriate care and services to meet their individualized needs. These rules were further expanded by the CMS Mega Rule, a 3-phase approach to reforming requirements for Long-Term Care Facilities. The first phase was implemented in November 2016; the second phase was implemented in November 2017; and the third phase was implemented in November 2019.

The tragic cases we hear about are not related to the individual disclosing a previous history. They are related to a skilled nursing facility making a business decision that put their ability to profit and fill their beds over the need to safeguard the others in that facility.

Changes are necessary and although I am not able to support the bill as it is currently written, I would welcome the opportunity to work with members of this committee, other advocates, and industry to develop a process for admissions that both protects residents' rights and ensures there are safeguards in place to protect everyone in the skilled nursing facility.

Respectfully submitted,

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State Long Term-Care Ombudsman

Department of Aging and Disability Services